










Mini-White House Conference on Aging – Survey

1. Who Are You?

		Response Percent	Response Total
Title IIIB legal services program staff		26.2%	11
Legal services (not Title IIIB) program staff		4.8%	2
Elder law attorney - private practice		14.3%	6
Legal services developer		23.8%	10
Legal hotline staff		2.4%	1
Long term care ombudsman		0%	0
Protection and advocacy agency staff		0%	0
Educator - law school clinic		2.4%	1
Court staff		0%	0
State or area agency on aging staff		9.5%	4
National organization		4.8%	2
View Other (please specify)		11.9%	5
Total Respondents			42
(skipped this question)			0




2. How have the demographics of your community changed over the last 10 years? Has your target population (vulnerable, economically and socially dependent elders) changed? Please explain.

1. Many more non-English, non-Spanish speaking seniors, many of them poor, from east Asia, south Asia, Middle East, former USSR
2. Nevada has one of the fastest growing senior populations in the country. This has been true for a number of years, and they are aging in place.
3. Population has aged in same ways general population has aged.
4. Ohio tends to be a microcosm of the nation from a demographic viewpoint.

5. The population is getting older and in need of more home based options. We are seeing more elderly persons being exploited both by family and so-called interested parties. Prosecutors are reluctant to go after these individuals.
6. More Hmong, Spanish speakers, and immigrants. And just more poverty
7. The census indicated a loss in numbers of seniors in our state, which reduced the funds for LSCs.
8. The target population in Arizona has increased significantly and is expected to continue to increase.
9. In the 8 years I have been with the Elderly Legal Assistance Program our mission has not changed. We still serve on those 60 years old and older with those in nursing homes and of low income first.
10. Those 85 years and older grew 82% from 1990–2000 and are Arizona's fastest growing age group In 2000, Arizona's over-60 age group was 17% of the population. By 2020, it will be 24%
11. Like every other state, we have experienced huge growth in our senior population. Our "oldest" of the old population is especially large because Utah's, on average, live longer than most seniors. One major difference in Utah is that as the boomers are entering the system, Utah also has a boom of children entering schools. So we have a dual challenge, and most of the \$\$ will go to children. Our programs are very much at risk of funding cuts. Our target population is also becoming more ethnically diverse, especially the Hispanic population.
12. We are in Greater Boston. The elder population has grown much more diverse - with many more minority elders, and immigrant elders. Also, there are more of the eldest elders - 85 plus.
13. People are living longer. Those over 85 are increasing the fastest, percentage wise. Our numbers of people over 60, who are in poverty, are also growing percentage wise. The Baby Boomer bubble will begin to "ROLL OVER US" next year. Our minority community is growing much faster than the majority community. Our Hispanic community for the 8 rural counties of south central Idaho is approximately 14.6% of the total population. In Minidoka County, it exceeds 20%.
14. Our population is older. It is now more common for clients to be 80 years old and above. Also, we are seeing more non-white seniors, especially. Hispanic and Asian, though not nearly as many as we believe need our services.
15. Our Hispanic population has grown over 300% since the previous census. There are many folks who are in need of help but who are not connected to the aging network. There are many more non-English speakers.
16. Indeed, they have changed. In the past 30 years, the people 60+ who were Establishing senior centers, are now in their 90's and in need of assistance, specifically home and community based services.
17. The number of seniors has increased and the number using Legal Services has increase. All projections indicate that we can expect more increases in the future.
18. The target population is growing. The number of people who are becoming aware of the existence of aging services is also growing.
19. Increased significantly as the population ages and services for low or no income persons are cut or completely deleted
20. Elderly population is increasing. The costs of basic needs, especially housing has skyrocketed. There are more consumer problems.
21. Population has increased, only a few people in nursing homes can participate in self-government, assisted living homes are now the nursing homes (and just as substandard as nursing homes were in the 60s and 70s), more home-based care is preferred but not enough capable/trained people to do the service and the state has essentially conflicted out most private attorneys by buying a part of their services so now seniors really cannot bring suit against facilities and the state. The LTC ombudsman is still fairly ineffective because of lack of staff.
22. More dependent seniors
23. There are more persons needing legal assistance who are over age 65 living in this area.
24. Obviously, we have a larger number of people living longer, i.e., many more centenarians. Also, we deal with a much larger number of aging individuals with behavioral health issues that are not necessarily dementia-related.
25. More people, less money
26. There are more eligible clients.

27. Because there are more private practice lawyers handling Medicaid planning cases, we have more opportunity for referral of clients with assets, so that our clients overall are poorer than 10 years ago. Assisted living facilities are expanding, so we have more clients in these facilities now than 10 years ago.
28. There is a bigger disparity between the poor seniors and middle class seniors.
29. Large retiree population has aged 30 years since the retirement boom started down here. Many more foreign language seniors as well.
30. Much larger percentage of elderly, especially in small, rural communities, and our state has a lot of small, rural communities.
31. The Program still caters to Native American Elders and caregivers, especially grandparents who are raising grandchildren and great-children.
32. Number of frail elderly has increased and legal problems associated with diminished capacity have increased.
33. Not qualified to answer.
34. Substantial increase in the poor and the elderly, and the poor elderly. This has been caused by the net in-migration into Washington State, the loss of jobs (65,000 appx.), and the aging of the population.
35. Oregon increasingly 'ages in place' is relying heavily on community-based care. Service is hard to come by in rural areas, where seniors are most likely to live. Very limited housing opportunities. Influx of Hispanic and eastern European populations with multi-generation families . . .
36. Increase in average age of client
37. There are more Asian immigrants in the region.
38. The aging population has increased significantly and the target population has also increased having become more economically and socially needy. There are more elders dependent as a result of economic need, health care needs and as a result of having made unfortunate choices to attempt to circumvent some of the economic or other health care needs.
39. Of course, the population continues to age. Although as the capital city, there continues to be an influx of younger workers. Rural areas continue to age more significantly. Target audience is the same.

3. Have you seen an increase in coordination of legal services with the aging community or the private elder law bar during the past 10 years?

		Response Percent	Response Total
Yes		69%	29
No		14.3%	6
Same		16.7%	7
Total Respondents			42
(skipped this question)			0

4. Please briefly describe the collaborations you have seen in your community between legal services, the private bar, and other programs. How have these collaborations affected the delivery of legal assistance to vulnerable elders? 4. Please briefly describe the collaborations you have seen in your community between legal services, the private bar, and other programs. How have these collaborations affected the delivery of legal assistance to vulnerable elders?

1. Mostly at our initiative. We have pursued collaborative relations and better reciprocal referrals with other aging service providers and have recruited more private attorneys either to work directly with us as volunteers or to be open for consultation and/or referral.
2. Elder law section of the State Bar. Large increase in the number of private attorneys practicing primarily in elder law. Also, collaboration with Nevada Center for Ethics and Health Policy. Much greater access for all elderly citizens to life-planning tools. IIIB providers working closely with private attorneys to serve vulnerable population. Nevada has no Area Agencies on Aging, so the two IIIB providers in the state collaborate with all the LSC providers.
3. Strong community services (Senior Resource Council, Silver Key (private group supporting elderly) and other social services concerned with elderly have led the way. Elder law community is still small, but quality.
4. Our former Attorney General Betty Montgomery was instrumental and successful in establishing a program that utilizes attorneys who are state employees volunteering their time and expertise to assist low-income elderly with legal assistance.
5. The elder bar focuses on the heirs and not on the older person. Their practices are really on how they get money to the family and how do we impoverish the elderly person and make them eligible for Medicaid. It is generally not about how to address the concerns of the older person especially those who may be becoming forgetful or incapacitated. I do not find this to be the case with legal services that do focus on the needs of the elderly client and work to protect them from exploitation by family, friends and business people.
6. More pro bono development, a great growth in Elder Law private practitioners in general. We have a real decline in funding our LSC so the Bar has taken that on.
7. The statewide Elder Law Task Force is composed of 34 attorneys, half are private practitioners and half are public interest attorneys. The private attorneys have provided as much pro bono service as public interest attorneys. This has increased the delivery of legal services to vulnerable elders due to increased participation by private bar attorneys.
8. Our county has coordinated an elder abuse task force that consists of state aging agencies, local law enforcement, nursing home administrators and certified fiduciaries. Unfortunately, we are still a small group with little vision or direction; therefore, the group has not had a major impact on the delivery of legal services in our community.
9. We have more pro bono attorneys now than we had 8 years ago. They are taking cases, such as one where it is believed that the will is forged or that the testator was demented at the time the will was made. Community education is more and more on the vulnerable elders. We are trying to educate the public so they can recognize these signs and take proper action. We cooperated with the local police in training their officers on how to recognize abuse and what to do about it.
10. There has been very little collaboration within our communities as we have all been in competition for funding.
11. Utah has done a good job with collaborations. Our III-B provider meets with the Legal Services Director each month. The Bar has a "Needs of the Elderly" committee made up of attorneys and other interested persons that meet monthly. We also have a coordinated multi-disciplinary task force made up of APS, Ombudsman, AG's Office, police, LSD, Bar, banks, nursing homes and other LTC providers, and other governmental agencies that meets monthly. The collaborations are very helpful.
12. These collaborations have increased services available to vulnerable elders. For example, legal services and the Women's Bar have established a pro bono panel to do wills, health care proxies and Powers of attorney. We have a very strong NAELA Chapter in Mass. and we coordinate with them on legislative and policy advocacy. Our Attorney General also has an Elder Services program with telephone assistance available.
13. First, we both have a shortage of funds. Our Idaho Legal Aid is great, for seniors and others. I wish our AAA had more funds to help them. We contract for services at a limited amount for seniors. But the total services Legal Aid provides, far exceeds that small amount of \$\$.
14. We have programs that only use pro bono attorneys from the private bar, as well as programs that are "hybrids," with a staff plus a pro bono panel. Most firms now have pro bono coordinators, but there is great competition among agencies for the small percentage of attorneys and firms willing to do significant pro bono work.
15. Private bar became involved with legal services, LTCO and the legal hotline in a massive effort to protect low-income NH residents from MA cuts. This partnership helped many establish Miller trusts to prevent discharge for non-payment after MA medically needy was discontinued.
16. This area has partnered with Idaho Legal Aid for a variety of services, from issues with Social Security and Medicare to giving educational presentations for caregiver support groups. If we had additional funds to support a full time attorney with Legal Aid, the AAA would jump at the chance. Presently, every spare dime goes towards this exemplary program in southeast Idaho.
17. Idaho Volunteer Lawyers Program has been very helpful to us and is a good collaboration.




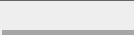

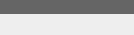

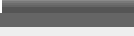


18. Our AAAs contract w/ Legal Aid for delivery of legal services. Legal Aid also manages a Senior Legal Services Hotline that is VERY successful. The state bar association has a volunteer lawyers service. Some courts have court assistance programs. These programs work ok for individuals w/ fairly simple legal issues but there is a huge gap for those w/ more significant legal problems. The private bar isn't very helpful for those who don't have the funds to pay.
19. Legal aid provides senior services to all persons 60 and over, regardless of need. Other than that program, I am unaware of other collaborations that provide legal services to vulnerable elders.
20. Much of the collaboration is a result of very limited funding. We have increased our training of the private bar --this group now does much of the Medicaid planning.
21. Legal services has engaged more attorneys to do pro bono work
22. Greater collaboration between legal services and senior services. Makes delivery of legal services and other senior services more efficient and reach more people.
23. Maryland has a Maryland Volunteer Lawyers Services program that recruits the private bar to provide free or reduced fee services for appeals from denials of Medicaid for persons in nursing homes. There is also an "over 60" program that provides the preparation of Wills, powers of attorney, and advance medical directives for a nominal cost (I believe it is \$25 per document).
24. Our state has an elder law section of the state bar association (which is a voluntary association) for the first time. Two Title III attorneys belong to it and to NAELA. There are only a few attorneys left in the Title III programs, but they collaborate with the private elder law bar all the time.
25. More pro bono attorneys take cases through referrals from legal service agencies. More attorneys mean more clients' cases can be served, and more complex issues can be addressed. Usually private law firms have more staff and resources than non-profit agencies.
26. We have a relatively new section of our state bar, the Elder Law Section, which focuses solely on the senior population. The specialization makes it more likely that a client can locate someone knowledgeable about senior issues.
27. The Indiana State Bar Association now has an Elder Law Section. It has been very supportive of the legal services for seniors programs. Our project has a working relationship with the state bar sponsored CLE provider, ICLEF, where we are able to use its facilities for trainings for private attorneys.
28. State bar association now has an Elder Law section, but no increase in services.
29. So far there have been no collaborations.
30. Regular periodic meetings facilitating coordination among both legal services providers and social service providers.
31. More participation of legal services in bar association elder law sections have led to more collaboration in skills development, case handling and referrals and legislative work. Better communication has meant more access for vulnerable elders to legal services, more pro bono work by private attorneys and more identification of systemic issues.
32. The aging community helped the Elder Law section form; the Bar has helped review and lobbied regulations in the long-term care area. Helping pay for the Legal Needs Study kept the senior community in the study. The Senior Hotline has been a binding force. The recent loss of funding will impact this of course.
33. There has been better networking in urban areas--but most of Oregon is rural, and private bar has little contact with legal services. Legal services now stretched so thin in rural areas as to be almost ineffectual on 'big issues' affecting elders.
34. Elder Law Hotline Law School Elder Law Clinic coordinating with LSC offices
35. There are more pro se and informational clinics arranged by our program but staffed by private attorneys.
36. Out of necessity, the private bar through volunteer projects, organized pro bono programs, legal services corporation grantees and Title III B legal services programs have come together to address common Medicaid crises, worked together to fill education needs, to meet specific gaps when called upon to do short term fixes. It is certainly not the entire private bar and there are always going to be those who take advantage of any crisis, but it is good to know that when needed, we can still work together.
37. Ten years ago there were no NAELA members, now there are a handful. Iowa Department of Elder Affairs and LSC seem to have more impact on the issues for elder law attorneys. Private CLE providers offer more programming. Only the YLD has legal services to the elderly committee. The senior bar does not. Supreme Court allows disclosure of emphasis in elder law, with compliance with rules.

5. How has the advent of unbundled services (single task assistance, hotlines, technology, websites, self-help, etc) impacted the legal resources available to elders in your community? Have legal resources increased or access to the justice system improved? Please explain.

1. Locally in our home county, thousands of seniors have received service from us, with lots of success stories and happy endings (not all, of course). This indicates that elsewhere in California, there's need and potential for us to serve many tens of thousands who have little or nothing to access now -- if only we had the capacity. A few are using our Internet services but most still don't have access.
2. Unbundled services are not entirely approved by the Nevada State Bar. However, the IIB providers have found a way to provide the services through their offices to vulnerable elders, especially to keep the clients from defaulting when they are parties to suits. Legal resources and access are not improving very rapidly at this point. Hot line is being discussed--Nevada applied for the grant at least twice and was turned down, so we are trying to devise a new idea before we apply again!
3. The hot lines have helped to direct folks to legal services. However it's always better to have individuals speak directly to seniors and community organizations. There is a lack of legal resources because funding has been reduced over the years.
4. We are not real unbundled because we coordinate so many of our services and cross-refer.
5. Yes, legal resources have increased with the development of lawhelp.org/la web site with a senior's section containing numerous topics. Every library has free Internet services and computer classes for seniors. A library card indicating the ten best web sites for seniors was distributed to all libraries. All Councils on Aging and Area Agencies on Aging have been advised of these resources. Based on information that I receive, it appears to have increased access for the senior community.
6. I grew up in this area and moved to a different state for 4 years. I have recently returned to start my own small business and I don't see any real changes in the delivery or access to legal services or the justice system in this community. It is still extremely difficult to get law enforcement or local prosecutors to accept and prosecute cases of elder abuse.
7. We often find seniors and their children are on the Internet. We can refer then to Georgia Legal Services website and several others that have Georgia forms and information on Georgia law. This allows us more time for those clients who cannot use the Internet or do not have the education to execute health care and financial powers of attorney.
8. All these types of services have helped in providing services to low income individuals but have not had a major impact on low-income seniors. Website technology and Self Help Centers provides access to court forms but no assistance to fill them out. Senior Law Hotline provides quick answers but no extended assistance callers are still referred out to the local aging network or other agencies for legal assistance. Funding for all these program have been cut in the last few years. Half in the last year cut the Senior Hotline funding.
9. Utah lacks a hotline, and there has not been a lot of emphasis on unbundled services. Our recent legal needs assessment points out that a hotline is the most desired legal service. As LSD, I am working toward obtaining a hotline for our seniors. Legal resources have not really increased, although pro bono attorneys in SLC have done a great job of stepping up when needed. Rural areas of our state, however, need more help.
10. Generally, legal resources have increased - primarily through the increase in self-help materials. We do not have a hotline
11. I believe legal services have increased with the use of the statewide legal hotline number.
12. Most of our target population is not using technology newer than the telephone. But our statewide phone hotline (began this year) is very busy with callers from all over PA that apparently had no other source of legal resources.
13. More people are being served due to HL and pro se materials on website. However, as a result, there are more people in need of full-service representation because HL identifies and refers more appropriate clients so work load has increased.
14. Yes, because elders are accessing the Idaho Hot Line, Idaho Legal Aid is accepting more referrals, giving more information and legal assistance.
15. The hotline in Idaho has helped relieve the pressure somewhat.
16. The Hotline is a good resource. However, because of the increasing demand and lack of funding, services are still woefully inadequate to address need.

17. I am not sure, but I do not think so. Low-income seniors may not have access to technology and even if they do, cannot use it because untrained.
18. It is more confusing for seniors because there is not just one place to go to for help
19. Not much.
20. I don't know how unbundled services have impacted the legal resources available to elders in my community. I am seeing more and more poorly drafted powers of attorney and wills because more people may be using forms they online. It makes more work for lawyers because a poorly drafted will may need judicial probate, which increases legal fees in an estate. Also, poorly thought out powers of attorney may require that a court be asked to authorize certain transactions such as the sale of real property or the transfer of assets from one spouse to the other to take advantage of the Medicaid spousal impoverishment laws.
21. Decreased horribly. Our regional funders always depended heavily on LSC funding and support and now that is all but gone. Our state has no coordination of the scarce remaining resources... so we haven't been impacted by unbundling because no one has actually tried it. We are just quietly fading away.
22. Sometimes it seems that it increases frustration because people are not sure where to go to get the help they need. Also, cases do not necessarily involve single issues.
23. Technology has increased the variety of options, but the decrease in funding for non-profits generally, and legal services, specifically, has reduced access by reducing staff and office locations. The use of technology has not necessarily reduced the cost of delivery of services. It has let us be more creative, but the economic effect has not offset decreases in funding or lack of needed increases in funding to maintain a level of service.
24. The Indiana courts are now more accepting of pro se clients, so our pro se advice is now more effective. We are continuing to develop our website and expect that it will be useful in extending services, though I do not yet have any data on that.
25. The ability to provide advice only hotline services has about doubled the number of seniors who are able to receive assistance in my state.
26. Florida lost its statewide senior legal hotline due to lack of funding, in 2002. This has impacted seniors badly as they now don't have one number to call to get legal advice, brief services, or referrals for representation or other services. The value of talking to a lawyer greatly reduced client stress, avoided the escalation of problems, spotted community legal problem trends. Each state needs this service
27. Not applicable.
28. Legal resources have not increased and neither has access to the justice system improved. Many of the elders and caregivers do not have enough money to buy food and pay their bills and as a result cannot afford to buy a computer.
29. Hotlines and self help options have increased. Self-help options are not necessarily reaching the most vulnerable and those we should probably reach out to serve the most.
30. Not qualified to answer.
31. Unbundled services are working--worse than full service, better than no service--in urban areas. Rural areas seldom have organized local bars, despite efforts from within to organize them. The result is no coherent policy or direction. Legal assistance hotlines reach more seniors, but have less impact as we lose the big picture for lack of staffing to follow through.
32. Just like the Medicare prescription drug card debacle, reliance on technology does not recognize the low penetration of technology in senior populations. These expanded access points increase availability to families of seniors, however.
33. Web-based information and services has dramatically increased in the past 10 years. The Court system has created a self-help center that serves all persons, including the elderly.
34. The availability of these services is critical. Neither resource is able to fill the need alone and one finds it constantly necessary to refer to one of the other resources all the time just to provide a complete package to meet the need. No one provider (private or public) has the funding to provide all to everyone.
35. Particularly the Internet has been used through NAELA. LSC hotline is more prominent. There has also been a significant change in Guardianship and conservatorship law. More awareness of requirements.

6. What do legal services staffs need -- aside from more money -- from the federal government, state government, or national support centers, to help better serve older clients? Check all that apply.

		Response Percent	Response Total
Information about changes in law, regulation, and policy		69.2%	27
Litigation support		59%	23
Technology assistance		61.5%	24
Demonstration grants to test delivery mechanisms		51.3%	20
Training on substantive elder law issues		64.1%	25
Assistance in developing partnerships		46.2%	18
Assistance in outreach to target populations		56.4%	22
Assistance in coordinating or extending resources		64.1%	25
Assistance in serving Limited English Proficiency elders		69.2%	27
View Other (please specify)		28.2%	11
Total Respondents			39
(skipped this question)			3

6a. Other

1. Leadership in promoting and coordinating different services statewide
2. Information about protective services and guardianship
3. All of the above is helpful.
4. More money
5. A more unified system that is understandable by the average person
6. Advocacy within the Aging Network about the value of legal assistance
7. Loan forgiveness programs to attract quality attorneys out of law school
8. Remove LSC restrictions on class actions and attorney fees
9. By Technology, access to low cost hardware and software
10. Real access to technology.
11. Elimination of LSC restrictions

7. What impact has LSC realignment; state planning, or other systemic efforts had on the ability of legal services programs to serve elders in your community?

1. Little or none
2. None, unfortunately. The LSC providers are still reluctant to handle elderly clients.
3. I have not seen any difference so far
4. None
5. I believe it has limited the outreach to the most rural communities due to distance and regional differences.
6. Unsure
7. If it was not for LSC, there would thousands of elders who would be left with no legal professionals to fight for them. Also, in the last 6 months, our LSC has spoken to some 1,400 elders about matters that affect them daily.
8. Very little legal system for seniors still fragmented.
9. None. Our state is looking at the impact of the seniors on delivery of al services, but legal has not been on anyone's "radar." Our legal needs survey has done a lot to help legal services get back on the radar.
10. Not clear yet - state planning efforts still underway
11. ???
12. I have seen little effect on direct services.
13. To date, seniors' groups have not participated in state planning, though they were invited to do so. I think that LS folks believe that OAA generally serves higher income folks (though this is not the case). Our state has not had to close or consolidate LS offices (yet) but resources are stretched pretty thin.
14. N/A
15. Unknown
16. We still can't meet need.
17. I think the cut in funds has drastically reduced the service to elders in my community
18. Very hard to tease out impact of these factors when overall funding is so limited.
19. LSC has not had the staff to participate and the separation from the other services (LTC ombudsman, PADD agency, Medicaid counseling, etc) has cut the actual availability of services because it is spread out to many different agencies.
20. Makes it more difficult.
21. I do not work in an LSC program, but what I do see is that the government is building on an already fragmented health care delivery system that complicates the accessibility of services (legal and health care). It is difficult for an average person to get information on all the options available to get assistance and how to qualify for these services. Lawyers in private practice do not usually deal with poor people who need assistance (unless the person can pay for services). What I see is that the assistance that these poor people need (especially if they have health problems) requires navigating through a very complicated system that even a lawyer would have difficulty understanding.
22. Greatly increased the rapidity of the extermination of elder-focused services.
23. Our state (Indiana) went through a reconfiguration by forcing all LSC-funded programs to merge. This did not help with distribution of Title III monies. It has reduced administration costs. Unfortunately, it has yet to cause a review of service areas and disproportionate staffing in branch offices. We keep being asked to do more with less. Elderly clients are often not able to travel, so it is harder for them to find us. Representing elderly clients is costlier since more client contact is often needed, including home visits. When clients live an hour and a half from the office, the distance adds to the cost of representation and also influences the level of service provided. Little I have seen in terms of realignment, planning, or systemic efforts has recognized the special needs of the elderly apart from the general poverty population.
24. Indiana has merged its LSC programs. However, one of the former LSC programs did not join the merger and continues to provide IIIB services. The merger has allowed increased communication between the offices, although it was pretty good even before the merger. We have had budget difficulties, which have led to some offices needing to serve larger areas.
25. The programs have developed unified intake systems and advice only services as a result of state planning
26. Local LSC's have combined into one LSC; easier to reach LSC in rural areas.
27. The elders of the Rosebud Reservation are still considerably underserved and ignored.
28. no impact whatsoever.
29. Not qualified to answer.

30. We have over the last ten years lost over 50% of the legal services capacity. There are fewer programs, and programs are forced to use more costly private attorneys. Without an increase in funding the result are fewer services.
31. LSC has made changes on two levels--first, in 1996, the restrictions, which have burdened legal aid workers with busy work and greatly reduced their leverage (attorney fees, class actions, etc); and more recently, forcing programs to go statewide when that model is not necessarily the most appropriate for different populations. Because Oregon programs are committed to keeping a presence in rural communities, and because the programs contract with small rural AAAs to serve seniors, the amounts of money allocated for service to non-LSC eligible elders is insufficient to take on a significant case (in some counties, it is less than \$1,000 per year).
32. LSC realignment has taken the focus off the elder law component and caused the senior citizen law projects to stagnate.
33. None

8. What if any additional communications networks would help you assure quality legal services for your elderly clients?

1. An on-line newsletter on elder law developments open to anyone in the state who is interested. We created the group but don't have the resources to actually do it. It would be a natural for a legal services developer if the state would provide the resources to that office.
2. A hotline.
3. Presentations by the private bar. Education to the courts.
4. We need national data base systems, redesigned web site interactive models, single intake and referral forms
5. Every state have a AOA funded legal hotline for seniors.
6. Unsure
7. It would be good if we could have access to laws form other states so we can better understand problems when clients come in with cases in these states. If there was some service or site we could utilize to ask the questions.
8. State based listserve to share best practices and information amongst state alder law providers and other interested senior service agencies.
9. None
10. In our area, Legal Aid is very good about attending and being involved in various services provider groups!!
11. Maybe newsletters or listserves focused on particular areas of law.
12. Network with senior housing and any other aging entity that could lend information for legal issues.
13. Unknown
14. More money for hotlines.
15. The list-serve available from the ABA is very helpful. This model gives advocates an opportunity to reach experts quickly.
16. Time for the advocates to meet regularly without having to cut their caseload or direct services time
17. Better utilization of current networks.
18. A central database that is well indexed and updated regularly would be a good start.
19. I depend heavily on listserves such as the ABA, NAELA and our small state bar listserve. I use websites and "back-up" centers constantly. Without those resources, I would terminate my contract and call it quits. I also rely heavily on certain publications, such as Carlson's book.
20. It would be great to be hooked into health providers, such as the county hospital.
21. The current communications networks of various e-groups already are difficult to keep up with, so I am uncertain that other networks are needed.
22. I think we communicate quite well.
23. A national Elder Law organization that actually concentrates on helping its members to serve elderly clients better, that actually advocates for issues affecting elderly clients, and that does not concentrate on serving the egos of the select elite members of the organization to the exclusion of the "hoi polloi" members, and that *includes* legal services attorneys as well as private Elder Law attorneys at an affordable price.
24. None

25. Don't understand the question.
26. Unknown
27. There are plenty of "networks". I am not sure there is a single source elders can turn to for answers. It may be a problem of lack of coordination rather than a lack of networks for information.

9. In your opinion, during the last 10 years have legal services programs become more or less integrated into the law and aging community?

1. It seems we always were to some degree. Not sure what you mean.
2. More integrated. The NALC has been a great help.
3. Increased in knowledge base and coordination.
4. In New Jersey legal services were the law and aging community for many years. The elder bar grew only when there was more access to do Medicaid planning. Legal Services still is the lead on major issues that face the elderly.
5. About the same
6. More, there is better education of the available legal resources. Most legal services programs are aware of who and what legal areas every other legal service provider offers.
7. I do not believe that the integration has changed at all.
8. Yes. There are more and more attorneys and paralegals aware of the elderly and their specific needs. We still need more attorneys who specialize in elder law.
9. Less integrated due to lack of a good coalition of providers. Cases that may have a community impact are seemingly rarely shared between providers, impact is greatly reduced and the law and aging community does not prosper from the accomplishment of one. No Three Musketeers motto "All for one and one for all."
10. I don't really know enough "history" in Utah to give a good answer.
11. More integrated
12. ??Same??
13. Maybe a little more, but not enough. We have been a legal service provider for 25 years and contract w/ our county AAA, but some social workers in the AAA itself seem to know nothing about us & never refer! The same for many private social work, housing or visiting nurse agencies. This despite numerous outreaches and mailings.
14. While they should be more integrated as a result of elder rights initiatives that have not necessarily been the case. I think legal services stays outside the rest of the network - called only when needed. Aging advocates don't think they can get quick response from LS offices due to the high demand for services.
15. Yes definitely.
16. I think they have become more integrated.
17. Because of the stagnant funding, I think they've become less of a focus.
18. Less
19. More
20. They are more integrated in the sense that everyone knows the one attorney but far less effective at dealing with all the issues because they cannot advise or touch all the various services
21. More
22. In some ways, they have become more integrated because more people are aware of them. In other ways, because they are very limited in what legal services they can provide, they cannot really be a part of the elderly community. For example, many legal services available for the poor elderly will not assist a person who needs to file a medical assistance application for Medicaid nursing home benefits, although they will assist on an appeal if a person is denied for benefits because they did not meet a level of care required by the state. It seems to me that if a poor elderly person could get legal assistance from the beginning of the Medicaid application process, then an appeal would not usually be necessary. Also, there are many other areas of law that in which an LSC cannot provide representation or even advice.
23. Less and less. We interface much more with private attorneys than legal services in my state (and I work at a legal services office). For the last several years, I have found almost nothing of relevance was offered at the annual statewide legal services training. The state plan, developed pursuant to LSC requirements, doesn't even address elder law issues or delivery.
24. More integrated as our outreach has expanded knowledge of available programs and services.

25. Since we do training (on Medicaid & other elder law issues) for the private bar and human service providers, it feels like we are closely tied to the broader legal and aging community.
26. Because of the involvement of current and former legal services staff in the Elder Law Section of the ISBA, there is more integration.
27. More so, but there is still a long way to go.
28. More
29. Slightly more.
30. More integrated.
31. More. Still more needs to be done.
32. Not qualified to answer.
33. More
34. Less integrated. Decreased funding has meant office closure, smaller staff with limited ability to conduct outreach or commit to cases.
35. Same
36. More integrated
37. Gradually legal services programs have become more integrated into the law and aging community. It has been a slower process than it should have been because the funding has not been there for the Developer to ensure that the legal services programs were fully integrated into the states and the aging network and the elder rights system as they should be. In many states, they still are not integrated.
38. More. Generally, elders know of autonomy issues more. Medicaid planning issues come up more frequently. More information and attention is being paid to elder abuse and exploitation issues. Local Co. Atty. has improved efforts to prosecute "abusers." Elder Affairs has attempted to coordinate various audiences.

10. What additional issues should we be considering as we examine how legal services will be delivered during the next 10 years?

1. Making the case to legislators and other funders about how important our service is. We have the ability to do it, just not the resources. ... Enforcing OAA requirements that states take the subject seriously.
2. Serving a rapidly aging population in rural areas where over 50% of the population is over 65, and there are few or no lawyers. These are often "unbefriended" elderly who are suspicious of any government-type program. The counties in which they live are becoming more and more impoverished as their population ages and diminish; so county services are often non-existent.
3. Support of the elderly in the community to assure that they can self determine their own destiny Increased consumer efforts to protect the elderly from financial exploitation Getting more prosecutors involved in going after exploiters Realigning the funding of long term care - - change the way Medicaid spend downs are done so more of the funds would go to the truly needy Fight to make sure that corporations do not continue to play with retired workers health, welfare and pension benefits Continue to work to assure that social security and Medicare do not get altered to the detriment of the elderly
4. The change in pension funding for the boomers, the huge numbers coming, the complexity of the MMA and the confusion as a result, the changes in the appeals processes, the increase in poverty among the elderly, the question of declining competence and the fact that the family structure has changed and will not be able to provide the unpaid care it has in the past, the 2 billion dollars in unencumbered assets that make the elderly targets for scams and rip offs.
5. A comprehensive legal needs assessment for every state to determine who is the target population, what are their most essential legal needs, and how could they best access legal services.
6. We need to continue to inform the elder community about what services may be available to them. The elder community needs to understand what elder abuse is, how to avoid it, how to report it and what services are available to them. The goal should be to make the elder community the advocates. Give them the tools they need to stand up for them and fight for services.
7. We need to have the attorneys understand more about elder law. Some of the attorneys seem to not like the elderly and therefore they won't even attempt to assist them. It takes a special person to do elder law, as the elderly can be difficult and in many cases very uneducated.

8. LSC case priorities and where the elder population fit within them.
9. I think every state should do a legal needs assessment. There is a lot of "assumption" about needs, and there should be more exploration into the actual needs of our seniors. Also, I think the use of the web is way over-rated, especially in the minds of legislators. They seem to think that if you publish a bunch of brochures to the web, the problem is solved. But seniors don't want to use the web for legal concerns. Our survey and focus groups clearly indicate that seniors want a live person to address their concern. And they prefer the anonymity and convenience of a hotline. AOA should provide funding for a full-time LSC in every state, and a hotline in every state. These two efforts would be relatively cheap, and would provide tremendous value to seniors.
10. ??Primarily, more funds are needed.
11. In my view, we need to focus OAA and other funding for legal services on the poor elderly and end the fiction that we don't "means test." We MUST means test in order to get limited funding to the seniors who, without it, will be denied representation, protection or justice because they cannot pay.
12. Strengthen role of developer or someone at state level to help coordinate services, set standards for delivery, and assure that resources are maximized and coordinated. Figure out how to integrate legal better into elder rights array of services. Advocacy to assure that services go to most in need.
13. *Have legal services staff housed in the Area Agency for better coordination.
14. Guardianships and paying for them has become a big issue in our area. We see that as only getting worse.
15. Internet access.
16. Special focus on elders with dementia and legal representation and protection for them
17. Gaps between rich and poor. Poor will have less access than the rich.
18. In small population states such as Alaska, the services should not be separated or when the grants go out, there should be an overall plan and agreement how the various parts of the system will work together and be accessed by seniors. Letter of recommendation and MOA for grants are essentially meaningless
19. More comprehensive legal services for the poor need to be considered that include more areas of law, such as assistance with dealing with the Department of Social Services where Medicaid and pharmacy assistance applications are filed. Also, there is a need for services for landlord - tenant problems. More of a one-stop service for the elderly is needed instead of fragmented services where now an elderly person has to call one telephone number for information on how to get a will and another telephone number has to be called to get assistance for another matter. Someone needs to take a look at the whole picture from the consumer's point of view sometime soon.
20. We need to establish some ethical recommendations for programs that employ contract attorneys who also practice elderlaw in a private setting, in order to avoid conflict-of-interest issues and inappropriate self-referral. At present, my state has only one full-time title III attorney, so we should have already dealt with this.
21. We need better protocols for "hot" issues so that we can respond immediately to problems and give those problems adequate focus. Predatory lending or the broader problem of mortgage foreclosures are examples of issues that have had a dramatic impact on our clients but which small offices are ill-equipped to handle.
22. We continue to struggle with how to reach the isolated clients. We have enough to do already so that we often don't concentrate on outreach, but we know there are lots more people with problems who don't get to us.
23. Mechanism for spotting legal problem trends delivery efficiency increasing number of clients receiving extended services changes in clients situation after receiving brief or extended legal services
24. Developing and providing appropriate web-based services.
25. The importance of housing and supportive services to keep people safely in their own homes as long as possible.
26. Given the goal of at least one State (Maryland) effectively to eliminate long term care Medical Assistance, which if successful will undoubtedly be copied by other States, the issue that will force out virtually all other issues will be the rationing, at best, and the possible termination of, actual medical care for elderly clients.
27. Stable funding that increases, as does inflation, starting at a level that would provide even half of the attorneys found to be necessary in the Legal Needs study.

28. Growing population in context of stagnate resources.
29. One of the answers that I received yesterday from one of my Title III B legal services provider during a site visit when asking what service do you wish we provided that we don't was "a Social Worker". I know why this response was given, because I've had the same thought as I've closed cases that I've worked on and months later or years later a former client may call and they remember me well because I am the only attorney they've had, but they are one of many clients. They actually need a form of case management. It may be that legal services for the elderly may need to be delivered on a "continuum" much like other aging services. We can see that a person has a certain legal issue right now, but oftentimes, we can also see that "down the road" this client is `going to also need' but they may not know it or by that time, dementia may have set in. If there was some way that we had a tickler system to remind them to do a "legal check-up" in a few months, maybe we could catch problems before they occurred.
30. Probably the largest gap I see is the elder with low resources. I also see more call for end of life issues to be addressed in the next 10 years. Smaller families, more mobility, weaker social and religious connections seem to be factors in the next 10 years.